

Space is limited. Register today to ensure participation.

Douglas Bremner, MD; Sheldon Solomon, PhD; Teresa La Fromboise, PhD
Settler's Bay Lodge, Wasilla, AK
September 20th, 21st & 22nd, 2004

For more information call CoDI at 745-2634

Name (Please Print): _____
Organization: _____
Address: _____
City: _____ State: _____ Zip: _____
Daytime Phone: (____) _____ Email: _____
(To receive confirmation notice)

Full Tuition - 3 Day Attendance

_____ **\$125.00 before August 10, 2004**
_____ **\$175.00 before Sept. 20, 2004**
_____ **\$225.00 at the door**
_____ **\$75.00 Student Rate**

Single Day Attendance \$80.00/day

\$40.00/day Student Rate

(check one) __ Monday (9/20)
 __ Tuesday (9/21)
 __ Wednesday (9/22)

Total Paid \$ _____

PAYMENT MUST ACCOMPANY REGISTRATION.

Enclosed is my check # _____

CREDIT CARD REGISTRATION: _____ Visa _____ MasterCard

Card Number: _____ - _____ - _____ - _____ Exp ____/____

Signature _____

(Please print name on the card if different from the registrant.)

Refund Policy: For a full refund, a written cancellation notice must be received by September 10, 2004. Cancellations received after September 10, 2004 will be assessed a \$50 cancellation fee. No refunds will be given on or after the workshop date.

Mail form and payment to: CoDI, PO Box 1907, Palmer, AK 99645-1907 Credit card payments may be faxed to: 907-745-4897

There may be no audio or video taping during the conference.

Please secure child care prior to the conference as no infants or children will be allowed.

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